

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



93.603

United States Environmental Protection Agency

Notification of Regulated Waste Activity

Data Received (For Official Use Only)

SEP 13 1993

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ILD984926006

II. Name of Installation (Include company and specific site name)

WAL-MART #0201

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

120 Carlyle Plaza Drive

Street (continued)

City or Town

Belleville

State

ZIP Code

IL 62221-

County Code

County Name

163 St Clair

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

702 Southwest 8th Street

City or Town

Bentonville

State

ZIP Code

AR 72716-8013

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

Dobbs

(first)

Roscoe

Job Title

Store manager

Phone Number (area code and number)

618-277-5210

VI. Installation Contact Address (See Instructions)

A. Contact Address Location Mailing



B. Street or P.O. Box

120 Carlyle Plaza Drive

City or Town

Belleville

State

ZIP Code

IL 62221-

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

Wal-Mart Stores Inc

Street, P.O. Box, or Route Number

702 SW 8th Street

City or Town

Bentonville

State

ZIP Code

AR 72716-8013

Phone Number (area code and number)

501-273-6756

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

No

X

(Date Changed)

Month

Day

Year

SEP 17 1993

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☒ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify
3. Treater, Storer, Disposer (at installation)
Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☒ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒
2. Corrosive (D002) ☐
3. Reactive (D003) ☐
4. EP Toxic (D000) ☐
- (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
-

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 7 | 8 | 9 | 10 | 11 | 12 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature

Duane Kalsbeek

Name and Official Title (type or print)

License Coordinator

Date Signed

8-19-93

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).


EPA
93.603

United States Environmental Protection Agency

Notification of Regulated Waste Activity

 Date Received
(For Official Use Only)

SEP 13 1993
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)


A. First Notification


 B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

1LD984926006
II. Name of Installation (Include company and specific site name)
WAL-MART #0201
III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

120 Carlyle Plaza Drive

Street (continued)

City or Town

Belleville

State

IL

ZIP Code

62221-

County Code

County Name

St. Clair
IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

702 Southwest 8th Street

City or Town

Bentonville

State

AR

ZIP Code

72716-8013
V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

Dobbs

(first)

Roscoe

Job Title

Store manager

Phone Number (area code and number)

618-277-5210
VI. Installation Contact Address (See Instructions)

 A. Contact Address
Location Mailing


B. Street or P.O. Box

120 Carlyle Plaza Drive

City or Town

Belleville

State

IL

ZIP Code

62221-
VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

Wal-Mart Stores Inc

Street, P.O. Box, or Route Number

702 SW 8th Street

City or Town

Bentonville

State

AR

ZIP Code

72716-8013

Phone Number (area code and number)

501-273-6756

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

No

X

 (Date Changed)
Month Day Year

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

| A. Hazardous Waste Activity | | B. Used Oil Fuel Activities | |
|---|---|---|---|
| <input type="checkbox"/> 1. Generator (See Instructions) <input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input checked="" type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) | <input type="checkbox"/> 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions. <input type="checkbox"/> 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control | <input checked="" type="checkbox"/> 1. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace | <input type="checkbox"/> 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification |
| <input type="checkbox"/> 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify | | | |

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

| 1. Ignitable (D001) | 2. Corrosive (D002) | 3. Reactive (D003) | 4. EP Toxic (D000) | (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s)) |
|-------------------------------------|--------------------------|--------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

| | | | | | |
|---|---|---|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
| | | | | | |

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

| | | | | | |
|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

| | | |
|------------------------------------|--|------------------------|
| Signature <i>Quane Kalsbeck</i> | Name and Official Title (type or print) License Coordinator | Date Signed 8-19-93 |
|------------------------------------|--|------------------------|

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

9/14/93

Dear Notifier:

REPLY TO THE ATTENTION OF:

Enclosed you will find the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. You will find your twelve character ID number on the top portion of the enclosed notification form. This ID number acknowledges that you have filed a Notification of Regulated Waste Activity for the installation referenced on the notification form to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This ID number must be included on all shipping manifest(s) for transporting hazardous wastes; on all correspondence; and on all reports required under Subtitle C of RCRA by the U.S. EPA and State agencies.

Please carefully review your status to determine whether the box you have checked is correct for your installation. If you checked Box 1A "Generator" you are a large generator producing over 1000 kg/mo (2200 lbs). Large generators are subject to all applicable regulations under Subtitle C of RCRA including the Annual/Biennial Report. If you determine Box 1A was checked in error, you can change your status to either a Small Quantity Generator (100-1000 kg/mo) or a Conditionally Exempt Generator (less than 100 kg/mo) by notifying the U.S. EPA in writing at the address at the top of this letter. Please indicate which generator category is correct for your installation.

Please note the U.S. EPA number is site-specific. If your installation changes locations, a new notification is required for a new ID number. If your installation has changed ownership, a subsequent notification must be filed to allow the new owner to use the ID number.

If the purpose of your notification is a one-time disposal for a clean-up, PCB removal, underground storage tank removal, etc., please notify U.S. EPA in writing upon completion of the project. U.S. EPA will deactivate the ID number at that time. Any other notification changes not mentioned can be sent to U.S. EPA by letter.

If you have any further questions regarding hazardous waste activity, please contact the Region V Notification Hotline at (312) 886-4001.

Sincerely,

Sharon J. Kiddon
Environmental Protection Specialist



Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

RECEIVED
SEP 29 1993
U.S. EPA REGION IV

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ILD984926006

II. Name of Installation (Include company and specific site name)

Wal-Mart Department Store

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

120 Carlyle Plaza Drive

Street (continued)

City or Town

State

ZIP Code

Belleville

IL 62221-

County Code

County Name

163 St. Clair

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

1750 South Brentwood Blvd. 602

City or Town

State

ZIP Code

St. Louis

MO 63144-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

Staenberg

Michael

Job Title

Phone Number (area code and number)

President

314-961-2929

VI. Installation Contact Address (See Instructions)

A. Contact Address Location Mailing

B. Street or P.O. Box

☐ ☒ 1750 S. Brentwood Blvd 602

City or Town

State

ZIP Code

St. Louis

MO 63144-

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

THE Belleville Development LP

Street, P.O. Box, or Route Number

1750 S. Brentwood Blvd. 602

City or Town

State

ZIP Code

St. Louis

MO 63144-

Phone Number (area code and number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed) Month Day Year

314-961-1928

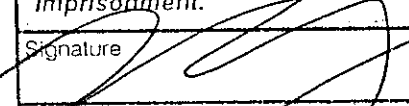
P

P

Yes

No

X

| ID - For Official Use Only | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------------------------|-----------------------------------|--|-----------------------------------|--|---|--|--|-------------------------------------|--------------------------|--------------------------|--------------------------|---|---|---|----|----|----|--|--|--|--|--|--|
| VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.) | | | | | | | | | | | | | | | | | | | | | | | | | |
| A. Hazardous Waste Activity 1. Generator (See instructions) <input type="checkbox"/> a. Greater than 1000 kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input checked="" type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input checked="" type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify _____ 3. Treater, Storer, Disposer (in installation) Note: A permit is required for this activity; see instructions. 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Burner - Indicate device(s) Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control | B. Used Oil/Fuel Activities 1. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner - Indicate device(s) Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace 2. Specification Used Oil Fuel Marketed (or On-site Burner) Which First Claims the Oil Meets the Specification <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | |
| IX. Description of Regulated Wastes (Use additional sheets if necessary) | | | | | | | | | | | | | | | | | | | | | | | | | |
| A. Characteristics of Nonlisted Hazardous Wastes: Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) <table style="width: 100%;"><tr><td>1. Ignitable (D001)</td><td>2. Corrosive (D002)</td><td>3. Reactive (D003)</td><td>4. Toxicity Characteristic (D000)</td><td colspan="4">(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))</td></tr><tr><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td></td><td></td><td></td><td></td></tr></table> | | 1. Ignitable (D001) | 2. Corrosive (D002) | 3. Reactive (D003) | 4. Toxicity Characteristic (D000) | (List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s)) | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | |
| 1. Ignitable (D001) | 2. Corrosive (D002) | 3. Reactive (D003) | 4. Toxicity Characteristic (D000) | (List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s)) | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | |
| B. Listed Hazardous Wastes: (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.) <table style="width: 100%; text-align: center;"><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | 1 | 2 | 3 | 4 | 5 | 6 | | | | | | | 7 | 8 | 9 | 10 | 11 | 12 | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| C. Other Wastes: (State or other wastes requiring an I.D. number. See instructions.) <table style="width: 100%; text-align: center;"><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | 1 | 2 | 3 | 4 | 5 | 6 | | | | | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| X. Certification | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature  | Name and Official Title (type or print) Denton | Date Signed 9-15-93 | | | | | | | | | | | | | | | | | | | | | | | |
| XI. Comments | | | | | | | | | | | | | | | | | | | | | | | | | |
| The liquid waste has ignitable constituents, but the total liquid wastes are not ignitable. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.) | | | | | | | | | | | | | | | | | | | | | | | | | |



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

Dear Notifier:

Enclosed you will find the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. You will find your twelve character ID number on the top portion of the enclosed notification form. This ID number acknowledges that you have filed a Notification of Regulated Waste Activity for the installation referenced on the notification form to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This ID number must be included on all shipping manifest(s) for transporting hazardous wastes; on all correspondence; and on all reports required under Subtitle C of RCRA by the U.S. EPA and State agencies.

Please carefully review your status to determine whether the box you have checked is correct for your installation. If you checked Box 1A "Generator" you are a large generator producing over 1000 kg/mo (2200 lbs). Large generators are subject to all applicable regulations under Subtitle C of RCRA including the Annual/Biennial Report. If you determine Box 1A was checked in error, you can change your status to either a Small Quantity Generator (100-1000 kg/mo) or a Conditionally Exempt Generator (less than 100 kg/mo) by notifying the U.S. EPA in writing at the address at the top of this letter. Please indicate which generator category is correct for your installation.

Please note the U.S. EPA number is site-specific. If your installation changes locations, a new notification is required for a new ID number. If your installation has changed ownership, a subsequent notification must be filed to allow the new owner to use the ID number.

If the purpose of your notification is a one-time disposal for a clean-up, PCB removal, underground storage tank removal, etc., please notify U.S. EPA in writing upon completion of the project. U.S. EPA will deactivate the ID number at that time. Any other notification changes not mentioned can be sent to U.S. EPA by letter.

If you have any further questions regarding hazardous waste activity, please contact the Region V Notification Hotline at (312) 886-4001.

Sincerely,

A handwritten signature in dark ink, appearing to read "Sharon J. Kiddon", is written above the typed name.

Sharon J. Kiddon
Environmental Protection Specialist

